

IN THE MATTER OF:)
)
Jessica R. Lewis, RCP)
License Number – 3847)

CONSENT ORDER

1. Jurisdiction

The North Carolina Respiratory Care Board (the Board) is an occupational licensing board of the State of North Carolina, organized under N.C. Gen. Stat. § 90-646, et seq. The Board has jurisdiction over this matter pursuant to N.C. Gen. Stat. § 90-652 and 21 N.C. Admin. Code § 61.0307.

2. Identification of Petitioner

The Respiratory Care Practitioner is Jessica R. Lewis (the "Petitioner"). Her mailing address is 940 Young Rd. Nashville, NC 27856 The Respiratory Care Practitioner previously held North Carolina Respiratory Care License number 3847 (the "License"), first issued on August 2, 2004, and renewed annually thereafter, but revoked in October of 2012.

3. Waiver of Rights

I, Jessica R. Lewis, the Petitioner, hereby confirm that I understand that I may have each of the following rights, and as noted by my initials below, I hereby freely and knowingly waive each of these rights without further process and agree to the terms of this Consent Order regarding the reinstatement of my License:

(Initials)

 JR

The right to a hearing before the Board;

 JR

The right to present evidence to disprove all or some of the charges against me;

 JR

The right to present evidence to limit or reduce any sanction that could be imposed for a violation;

 JR

The right to confront and cross-examine witnesses and to challenge evidence presented by the Board against me;

 JR

The right to present legal arguments in a brief; and

 JR

The right to appeal from any final decision adverse to my license to practice respiratory care.

4. Stipulation to Facts

The Petitioner and the Board stipulate to the following facts:

A. The Petitioner was engaged in the practice of respiratory care in North Carolina when the events occurred that led to the revocation of her License in 2012.

B. The Board was notified by Cheryl Bachelor, RN of First Health - Moore Regional Hospital, that the Petitioner tested positive for opiates and benzodiazepines on a drug screen administered at the hospital on September 19, 2011.

C. On December 12, 2011 the Petitioner requested a continuation of the interview until the March 2012 meeting of the Board's Investigation and Informal Settlement Committee, which was granted.

D. On February 21, 2012 the Board was notified by Shelby Holt, RCP, of Johnston Memorial Hospital, that the Petitioner tested positive for opiates and benzodiazepines on drug screens administered at the hospital on January 29, 2012 and February 20, 2012. Ms. Holt also stated that the Petitioner had exhibited erratic behavior and had missed treatments during her shift on February 20, 2012.

E. The Petitioner attended the Board's Investigation and Informal Settlement Committee meeting on March 12, 2012 and was unable to offer an explanation for the positive drug screens or provide any documentation that she had a prescription for any of the medications that had shown positive on the drug screens.

F. On April 12, 2012, the Board placed the Petitioner on probation for 36 months with random drug screens, physician's pain management plan, fitness to return to work, quarterly supervisor reports, and attend an interview on June 12, 2012.

G. On June 12, 2012, the Petitioner did not attend the required interview and failed to provide any additional information to the Board by any other means.

H. On July 24, 2012, the Board issued a Notice of Revocation and scheduled a hearing at its meeting on October 11, 2012.

I. On October 11, 2012, the Petitioner failed to appear for the scheduled Hearing and failed to provide any additional information. The Board voted to revoke the License effective October 11, 2012. Since that date, the Petitioner has held no license to practice respiratory care in North Carolina.

J. On May 19, 2015, the Board staff received a request for reinstatement and in response, a letter was sent to the Petitioner, inviting her to meet with the Board's Investigation and Informal Settlement Committee and informing her of the requirements to be fulfilled prior to the meeting which included:

- According to Board Rule 21 NCAC 61 .0201 APPLICATION PROCESS, persons whose licenses have been lapsed in excess of 24 months and who desire to be licensed shall apply for a new license and shall meet all the requirements then existing. Under the provisions of 21 NCAC 61 .0201 (a) (5), the Petitioner must provide evidence from the National Board for Respiratory Care (NBRC) of successful completion of the Certified Respiratory Therapist (CRT) examination administered by it.

- According to 21 NCAC 61 .0401 CONTINUING EDUCATION REQUIREMENTS, the Petitioner must submit evidence of 36 CE credits, with 18 hours of these credits must be live or direct interaction CE courses according to 21 NCAC 61 .0401 (a) (1).
- The Petitioner was requested submit the required documents as stated on April 12, 2012 prior to the interview with the Investigation and Informal Settlement Committee on 9/8/2015.

K. On September 8, 2015 the Petitioner attended IISC meeting and provided the required documents except for the CRT and the remaining CE credits. The Petitioner notified the committee that NBRC CRT credential was pending the Board's decision and notification of reinstatement to the NBRC.

L. The Board voted on October 8, 2015 to reinstate the Petitioner's License #3847 provided that the Petitioner completes the required CEs and reacquires the CRT credential and that she agrees to, and complies with, each of the conditions in this consent order.

5. Stipulated Order

A. Stipulation to Sections of Law Violated:

I, Jessica R. Lewis, admit that the positive drug screens identified above constitute evidence of violations of N.C. Gen. Stat. § 90-659 (a)(1)(d) and the regulations set forth in 21 N.C. Admin. Code 61.0307 (10).

B. Stipulation to Sanction:

Under N.C. Gen. Stat. § 90-652, the Petitioner and the Board hereby enter into this Consent Order whereby the Petitioner and the Board agree to the following terms:

1. The Petitioner agrees to accept a license to practice respiratory care on Probationary Status for a minimum period of 24 months from the date of execution of this order; and as a specific condition of that Probationary Status the Petitioner agrees to all of the additional terms and limitations.
2. If employed in Respiratory Care, the Petitioner shall cause her immediate supervisor to submit written quarterly reports to the Board during the time the Petitioner is on Probation. Each such written report shall document the Petitioner's performance in the delivery of Respiratory Care, and detail any concerns of the supervisor about the Petitioner's practice of Respiratory Care.
3. The Petitioner agrees to report any change of employment as a Respiratory Care Practitioner and/ any change of address in writing to the Board within five business days after any such change.
4. During the entire time that the Petitioner holds a license on Probationary Status, the Petitioner agrees to permit the Board to conduct random drug testing of the Petitioner, without any advance notice, and further agrees that the entire costs of all drug testing will be paid by the Petitioner. The Board will determine the laboratory where the testing would be performed and the manner in which the sample will be collected, and will instruct the Petitioner regarding these and any other details of how any drug test should occur. The Board may, in its discretion, accept drug screens performed by other state or federal agencies that are received directly from those other agencies.
5. While the Petitioner holds the License on Probationary Status, she agrees to attend one or more interviews with the Investigation and Informal Settlement Committee of the Board in the future,

with the number and the exact dates of the interviews to be determined by the Board in its discretion, to determine compliance with this Consent Order.

6. The Petitioner also assumes financial responsibility for any costs associated with fulfilling the terms of this Consent Order.

7. The Petitioner acknowledges and agrees that this Consent Order and the materials compiled by the Board are matters of public record under the North Carolina Public Records Law, N.C. Gen. Stat. § 132-1 *et seq.*; and that the contents of this Consent Order will be reported to the appropriate entities as outlined in Board policy and as required by state and/or federal law or guidelines. Those entities include, but are not limited to, the National Databank maintained by the National Board for Respiratory Care and the Healthcare Integrity and Protection Data Bank (HIPDB).

8. The Petitioner agrees that if circumstances arise which affect the RCP's ability to remain in compliance with any of the terms of this Consent Order, or to make continued progress on completing the requirements, the RCP shall immediately notify the Board in writing by return receipt mail, fully describing the situation and providing a specific request to modify its terms for Board consideration. However, no modification of this Consent Order shall be in effect until the Board confirms such a modification in writing to the RCP.

9. The Petitioner acknowledges and agrees that if she fails to comply with the terms of this Consent Order, either by completely failing to carry out one of her obligations, or by failing to complete an obligation within a time specified, that will constitute a violation of 21 N.C. Admin. Code 61 .0307(3), and that as a result, the Board may suspend or revoke the License, or impose additional disciplinary sanctions or performance obligations on the Petitioner.

10. The Petitioner agrees to continue to comply with the Respiratory Care Practice Act, the Board's Rules, and the Board's published interpretation of those rules in her practice of Respiratory Care.

6. Effective Date/Modification

All provisions of this Consent Order are effective upon the date that the Executive Director of the Board signs it, and unless amended in writing by the Board, it shall remain in effect for the later of the time period or periods specified, or until the Petitioner completes each of the steps outlined above.

The Petitioner acknowledges that if other evidence of the Petitioner's non-compliance with the Act or the Rules that is not presented in the Stipulated Facts above should arise, whether that non-compliance has occurred before or after the events presented in the Stipulated Facts, then the Board may invoke other disciplinary measures against the Petitioner, based on that other evidence; and that in determining the appropriate action to take in regard to such other evidence of non-compliance, the Board also may consider and take into account the conduct of the Petitioner which is presented in the Stipulated Facts in this Consent Order.

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NORTH CAROLINA RESPIRATORY CARE BOARD

125 Edinburgh South Drive, Suite 100
Cary, NC 27511

SECTION H - AFFIDAVIT (The application must be notarized.)

THIS STATEMENT MUST BE COMPLETED IN THE PRESENCE OF A NOTARY PUBLIC

I certify and acknowledge the following (initial each statement in the presence of a Notary Public):

[Signature] I am the person named in the various forms and credentials furnished with respect to my application and that all documents, forms or copies furnished with respect to my application are true in every aspect. I understand that if I fail to answer questions truthfully and completely, the NCRCB may deny my application or take other disciplinary action and that all license denials are reported to the National Practitioners Data Bank and other state boards.

[Signature] If I am in doubt about whether to report any information requested, I should fully disclose the information and provide an explanation of the circumstances.

[Signature] If someone else completed the application for me, I am responsible to make sure the answers are truthful and complete.

[Signature] I waive confidentiality, authorize and request every person, hospital, clinic, government agency (local, state, federal or foreign), court, association, institution or law enforcement agency having custody or control of any documents, records and other information pertaining to me to furnish to the NCRCB any such information, including documents, records regarding charges or complaints filed against me, formal or informal, pending or closed, my examination grades, or any other pertinent data and to permit the NCRCB or any of its agents or representatives to inspect and make copies of such documents, records, and other information in connection with this application that can subsequently be provided to professional licensing boards, hospitals and other entities when I apply for licensure, staff membership, employment or other privileges.

[Signature] I hereby consent to the release to the NCRCB of all education records from any respiratory care program in which I have been enrolled at any point in the past, including any program identified by me in this application.

[Signature] I hereby release, discharge and exonerate the NCRCB, its agents or representatives and any person, hospital, clinic, government agency (local, state, federal or foreign), court, association, institution or law enforcement agency having custody or control of any documents, records and other information pertaining to me of any and all liability of every nature and kind arising out of investigation made by the NCRCB.

[Signature] I certify that I have read and understand the Respiratory Care Practice Act and the Board Rules. I certify that I am currently certified by the American Heart Association (BLS for Healthcare Provider) or the American Red Cross (CPR/AED for the Professional Rescuer) or the American Safety and Health Institute (CPR/AED for the Professional Rescuer) and that I will maintain certification. (Enclose a copy, front and back, of your current BLS or Professional Rescuer card).

[Signature] I understand that state law requires me to provide to the Board within 30 days any change of name and change of residence and/or practice site address.

CONSENT TO ISSUANCE OF ORDER BY RESPIRATORY CARE PRACTITIONER

I, Jessica R. Lewis, state that I have read the foregoing Consent Order; that I know and fully understand its contents; that I agree freely and without threat or coercion of any kind to comply with the terms and conditions stated herein; and that I consent to the entry of this Consent Order as a condition of maintaining my license from the North Carolina Respiratory Care Board.

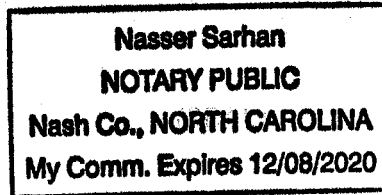
Jessica R. Lewis
Jessica R. Lewis

STATE OF NORTH CAROLINA
COUNTY OF Nash

There personally appeared before me, a Notary Public in and for the County of Nash, State of North Carolina, Jessica R. Lewis who, after having presented documentation of her identity that was satisfactory to me, did acknowledge that she executed the foregoing Consent Order as her free and voluntary act.

This 18 day of March, 2016.

Nasser Sarhan
Notary Public



My Commission Expires: 12/08/2020

ENTRY OF CONSENT ORDER ON BEHALF OF THE NORTH CAROLINA RESPIRATORY CARE BOARD

The foregoing Consent Order is entered at Cary, North Carolina, this 22nd day of March, 2016.

William L. Croft PH.D., RRT, RCP
William L. Croft, PhD, RRT, RCP
Executive Director, North Carolina Respiratory Care Board